

GENERAL OPERATION PERMIT APPLICATION
CONSTRUCTION AGGREGATE PLANT
Form 4530-141 01-95

Information attached? _ (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1.	Facility name and mailing address	Name		
		Street or Route		
		City, State, Zip Code		
2.	Plant Name and location	Name		
		Street or Route or Description		
		City or Village or Township and County		
3.	Responsible official	Name		
		Title		
		Telephone		
4.	Permit contact person	Name		
		Title		
		Telephone		

5.	SIC code:	6.	Facility identification number:
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7. Type of permit applying for:

☐ Synthetic Minor (Particulate Matter) ☐ Synthetic Minor (NO_x)

☐ Part 70 Source Application ☐ Non-Part 70 Source

8. Stack and Capacity Parameters for Diesel Engine(s):

a) Discharge height above ground level (feet): _____

b) Diameter or length and width of stack at outlet (feet): _____ c) Exhaust flow rate (ACFM): _____ d) Exhaust gas temperature (°F normal): _____

e) Exhaust gas discharge direction: ☐ Up ☐ Down ☐ Horizontal

f) Is this stack equipped with a rainhat or any obstruction to the free flow of the exhaust gases from the stack? ☐ Yes ☐ No

g) Rated capacity of engine (hp): _____ h) Fuels used: _____

_____ i) Serial number: _____

j) Make: _____

k) Model: _____

l) Date: _____

[illegible]

[illegible]

INDEX OF AIR POLLUTION PERMIT APPLICATION FORMS
FOR THE CONSTRUCTION AGGREGATE
GENERAL OPERATION PERMIT
Form 4530-144 01-95

1. Facility Name: _____

2. Facility Identification No.: _____

This application contains the following form:	<input type="checkbox"/> Form 4530-141	
This application contains the following forms:		Total Number of This Form
	<input type="checkbox"/> Form 4530-142	
	<input type="checkbox"/> Form 4530-143	
	<input type="checkbox"/> Form 4530-131	

SIGNATURE OF RESPONSIBLE OFFICIAL	
A. STATEMENT OF COMPLETENESS I have reviewed this application in its entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this application are true, accurate and complete.	
B. CERTIFICATION OF FACILITY COMPLIANCE STATUS (check one box only) THIS IS NOT A REQUIREMENT OF NON-PART 70 SOURCES OR SOURCES THAT ARE SYNTHETIC MINOR FOR PARTICULATE MATTER. <input type="checkbox"/> I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements. <input type="checkbox"/> I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements, except for the equipment identified on form 4530-143.	
Printed or Typed Name	Title
Signature	Date Signed

SEND ALL MATERIALS TO:

WISCONSIN DEPARTMENT OF NATURAL RESOURCES
BUREAU OF AIR MANAGEMENT
PERMITS SECTION
P.O. BOX 7921
MADISON, WI 53707-7921

GENERAL OPERATION PERMIT APPLICATION INSTRUCTIONS
CONSTRUCTION AGGREGATE PLANT -- Form 4530-141 01-95

This application should be accompanied by Air Pollution Control Operation Permit Application Forms 4530-142, 4530-143, 4530-144 and 4530-131.

NOTE: Use of this form is required by the Department for an air pollution control permit application filed pursuant to ss. 144.391(3m) and 144.3925, Wis. Stats., and NR 407.10(3), Wis. Adm. Code for a construction aggregate plant. Construction aggregate plants which do not meet the criteria for filing a General Permit Application or which prefer to file an individual operation permit application should proceed to complete Air Pollution Control Permit Application forms 4530-100 through 4530-135. The Department will not consider or act upon your general permit application unless you complete and submit two copies of this application form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

Item 1 Provide full business name and address of corporation, company, association, society, firm, partnership, individual or political subdivision of the state submitting the application.

Item 2 Provide any plant name that is used by the applicant for this plant. Provide the location of the plant at the time of application. If the plant is not in operation at the time of application, indicate by writing "not in operation". Note that the statutes and rules require notice to be sent to the Department prior to relocation of the portable source.

Item 3 Responsible official means one of the following (s. NR 400.02(80e), Wis. Adm. Code):

(a) For a corporation:

1. A president, secretary, treasurer or vice-president of the corporation in charge of a principal business function;
2. Any other person who performs similar policy or decision-making functions for the corporation; or
3. A duly authorized representative of a person listed in items 1 or 2 if the representative is responsible for the overall operation of the plant applying for or subject to a permit and the representative is approved in advance by the department. Prior to filing the application, if you want the Department to approve your choice of responsible official you may send a letter to the Department describing that person's authority in the company and requesting the Department's approval and signed by a person listed in items 1 or 2.

(b) For a partnership or sole proprietorship: a general partner or the proprietor, respectively;

(c) For a municipality, or a state, federal or other public agency: either a principal executive officer or ranking elected official.

The responsible official is a person legally responsible for the operation of the permitted air pollution sources. For a corporation, this person must be the president, vice-president, secretary or treasurer, or other person with a similar level of responsibility in the company.

Item 4 Individual to contact for additional information concerning the air pollution sources during the permitting process.

Item 5 The standard industrial classification (SIC) code for the facility where the source will be located.

Item 6 Provide the facility identification number (FID) that has been assigned by the Department for this plant. If you do not have an FID, then call the Bureau of Air Management at (608) 266-7718 and request assistance in obtaining an FID for your facility. **NOTE: ALL CORRESPONDENCE FOR THIS PLANT SHOULD ALSO INCLUDE THE FID NUMBER ALONG WITH ANY PLANT NAME THAT IS USED BY THE PERMITTEE.**

Item 7 Indicate the type of permit you are applying for. Check all boxes that apply. For example, if you are applying for both a synthetic minor source permit for particulate matter and a synthetic minor permit to limit the potential emissions of nitrogen oxides (so that you can relocate into or within a nonattainment area for ozone without obtaining an additional permit) please check both boxes.

Item 8 **If the applicant has more than one engine which may be used at this plant, then, use a separate table to provide this information for any engine which may be used at this plant.**

- a) Provide the height (in feet) at which the stack discharges above ground level.
- b) Provide the internal cross sectional area of the stack exit. Attach measurements and calculations used for this stack parameter.
- c) Provide the normal exhaust flow rate in units of actual cubic feet per minute (ACFM).
- d) Provide the normal exhaust gas temperature (in °F).
- e) Check appropriate discharge direction. If the direction of discharge is at an angle, check the nearest direction.
- f) Check the appropriate box.
- g) Indicate the manufacturer's maximum rated capacity in units of brake horse power.
- h) Indicate all types of fuels that can be used in the engine. Include only fuels that the equipment currently has design capability to utilize and which you want flexibility to use under the permit.
- i) Indicate what identification serial number is used to identify the engine.
- j) Indicate the Make of the engine.
- k) Indicate the Model of the engine.
- l) Indicate the Date that you first operated the engine in the state of Wisconsin. If the date can only be estimated then enclose the date in parentheses.

GENERAL OPERATION PERMIT APPLICATION INSTRUCTIONS
CONSTRUCTION AGGREGATE PLANT
Form 4530-142 01-95

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Item 1. Facility Name: Provide full business name of corporation, company, association, society, firm, partnership, individual or political subdivision of the state submitting the application.

Item 2. Facility Identification No.: Provide the facility identification (FID) number that has been assigned by the Department for this plant.

Item 3. Type: Include the following equipment in this table: each crusher, grinding mill, screening operation, bucket elevator, belt conveyor, bagging operation, storage bin, enclosed truck or railcar loading station.

Item 4. Serial number: For purposes of identification, each piece of equipment identified in form 4530-142 can be identified with a unique serial number.

Item 5. Make and model: Provide the make and model, if known, for each piece of equipment. If unknown, indicate with the term "unknown". If built rather than purchased indicate with the term "shop".

Item 6. Construction (mmddyy): Indicate the date that construction (manufacture or fabrication by the maker), reconstruction (s. NR 440.15, Wis. Adm. Code) or modification (s. NR 440.14, Wis. Adm. Code) was last commenced. If the date can only be estimated, then enclose the date in parentheses.

Item 7. Operation (mmddyy): Indicate the Date that you first operated the equipment in the state of Wisconsin. If the date can only be estimated then enclose the date in parentheses.

Item 8. Subject to NSPS: Indicate if the equipment is subject to the New Source Performance Standards for Nonmetallic Mineral Processing in s. NR 440.688, Wis. Adm. Code.

Item 9. Replacement exemption: **This item is provided if you qualify for the exemption provided in s. NR 440.688(1)(d), Wis. Adm. Code., when equipment is replaced by a piece of equipment of equal or smaller size.** Use this item to indicate if you followed the procedures required in s. NR 440.688(7)(a) and (b), Wis. Adm. Code., and the equipment is exempt under s. NR 440.688(1)(d), Wis. Adm. Code. Use the column to indicate the date of the correspondence which was submitted to the Department and the U.S. EPA as required for this exemption. **IF THE APPLICANT HAS NOT SUBMITTED THIS CORRESPONDENCE, THEN THE APPLICANT IS NOT ELIGIBLE FOR THIS EXEMPTION.**

GENERAL OPERATION PERMIT APPLICATION INSTRUCTIONS
CONSTRUCTION AGGREGATE PLANT
Form 4530-143 01-95

This application should be accompanied by Air Pollution Control Operation Permit Application Forms 4530-141, 4530-142, 4530-144 and 4530-131.

NOTE: Use of this form is required by the Department for an air pollution control permit application filed pursuant to ss. 144.391(3m) and 144.3925, Wis. Stats., and NR 407.10(3), Wis. Adm. Code for a construction aggregate plant. Construction aggregate plants which do not meet the criteria for filing a General Permit Application or which prefer to file an individual operation permit application should proceed to complete Air Pollution Control Permit Application forms 4530-100 through 4530-135. The Department will not consider or act upon your general permit application unless you complete and submit two copies of this application form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

Item 1. Facility Name: Provide full business name of corporation, company, association, society, firm, partnership, individual or political subdivision of the state submitting the application.

Item 2. Facility Identification No.: Provide the facility identification (FID) number that has been assigned by the Department for this plant.

Item 3. Serial number: Only equipment identified on form 4530-142 as subject to the NSPS must be identified on this form. For purposes of identification, each piece of equipment identified in form 4530-142 can be identified with a unique serial number.

Item 4. Opacity test results: For each piece of equipment, use only one of the columns (Items 5., 6. or 7.) to indicate when the applicant submitted to the Department results of opacity observations made for purposes of determining initial compliance with opacity standards of s. NR 440.688(3)(b) and (c), Wis. Adm. Code. **IF THE APPLICANT HAS NOT MADE OPACITY OBSERVATIONS, THEN THE SOURCE IS REQUIRED TO COMPLETE FORM(S) 4530-131, EMISSION UNIT COMPLIANCE PLAN - COMMITMENTS AND SCHEDULE.**

Item 5. Date of submittal (MMDDYY): If the opacity results have been submitted then indicate the date of the submittal.

Item 6. Submitted with this application: If the opacity results are attached to this application then please indicate by checking yes.

Item 7. Check this box if no opacity observations have been made and to indicate that this equipment is not in compliance with the requirements of ss. NR 440.08 and NR 440.688, Wis. Adm. Code at this time and that the applicant will achieve compliance according to the schedule described in attached form(s) 4530-131.

When using form 4530-131 for this general operation permit application, it is not necessary to identify a stack identification number. You can either identify multiple pieces of equipment on the form 4530-131 or you can use one or more forms for each piece of equipment. Each piece of equipment listed as not in compliance on form 4530-143 should be identified in the field 4., Unit identification number, of form 4530-131. You will probably want to identify 3 applicable requirements for which you will need to describe Corrective Actions and Deadlines on form(s) 4530-131. Examples of these requirements and the respective citation(s) are provided as follows: 1. notify the Department in writing of the anticipated date of testing and submit a test plan (s. NR 440.07(1)(f), Wis. Adm. Code and s. 144.394(4), Wis. Stats.); 2. observe opacity (s. NR 440.11(5)(c), Wis. Adm. Code); and 3. report to the department the opacity results (ss. NR 440.11(5)(c) and NR 440.688(7)(f), Wis. Adm. Code). For the start date for the progress reports you should specify a calendar date such as May 1, 1995.